

Food Establishment Inspection Report

Pursuant to Title 25-A of the District of Columbia Municipal Regulations



Health Regulation and Licensing Administration • Food Safety & Hygiene Inspection Services Division • 899 North Capitol Street, NE • Washington, DC 20002 http://doh.dc.gov/service/food-safety Establishment Name EUREST DINING SERVICES **Priority Violations** COS O **Priority Foundation Violations** 0 COS n R 0 Address 1800 F ST NW Core Violations A COS 0 R 0 Certified Food Protection Manager (CFPM) City/State/Zip Code Washington, DC 20009 Telephone (202) 219-1448 E-mail address vaneev.benno@compass-usa.com CFPM Expiration Date: _ Date of Inspection 01 / 25 / 2017 Time In 12 112 PM Time Out 12 145 PM D.C. licensed trash or solid waste contractor; License Holder Compass Group USA Inc Landlord - GSA D.C. licensed sewage & liquid waste transport contractor: License/Customer No. 09306xxxx-160000043 License Period 01 / 01 / 2016 - 12 / 31 / 2017 Type of Inspection Follow-up D.C. licensed pesticide operator/contractor: Landlord - GSA Risk Category 1 2 3 4 5 Establishment Type: Restaurant Total D.C. licensed ventilation hood system cleaning contractor: FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS GOOD RETAIL PRACTICES Compliance Status Compliance Status Supervision Safe Food and Water OUT N/A 1.Person in charge present, demonstrates knowledge, and IN 30.Pasteurized eggs used where required IN OUT performs duties OUT 31.Water and ice from approved source OUT 2.Certified Food Protection Manager IN OUT N/A 32. Variance obtained for specialized processing methods nployee Health ood Temperature Control 3. Management, food employee, and conditional employee; 33.Proper cooling methods used; adequate equipment for IN OUT <u>in</u> OUT knowledge, responsibilities, and reporting temperature control OUT 4. Proper use of restriction and exclusion IN OUT N/A N/O 34.Plant food properly cooked for hot holding OUT IN OUT N/A N/O 5, Procedures for responding to vomiting and diarrheal events 35 Approved thawing methods used ood Hygienic Practices <u>IN</u> 36. Thermometers provided and accurate OUT 6. Proper eating, tasting, drinking, or tobacco use Food Identification OUT 7.No discharge from eyes, nose, and mouth <u>IN</u> OUT 37. Food properly labeled, original container ĺΝ Control of Hands as a Vehicle of Contamination Prevention of Food Contamination OUT N/O 8. Hands clean and properly washed IN OUT 38 insects, rodents, and animals not present 9.No bare hand contact with RTE foods or a pre-approved 39.Contamination prevented during food preparation, storage, IN OUT N/A N/O IN OUT and display alternate procedure property allowed OUT N/A 40 Personal cleanliness 10.Adequate handwashing sinks properly supplied and IN OUT 41. Wiping cloths: properly used and stored accessible IN IN OUT anroyed Source OUT N/A N/O 42. Washing fruits and vegetables OUT 11. Food obtained from approved source roper Use of Utensils IN OUT N/A N/O 12. Food received at proper temperature IN OUT 43.in-use utensils: properly stored <u>IN</u> OUT 13. Food in good condition, safe, and unadulterated 44. Utensils, equipment and linens: properly stored, dried, and IN OUT 14. Required records available: shellstock tags, parasite OUT N/A N/O OUT 45.Single-use/single-service articles: properly stored and used destruction rotection from Contamination **OUT N/A** 46. Gloves used properly OUT N/A 15.Food separated and protected Utensits, Equipment, and Vending OUT N/A 16.Food-contact surfaces: cleaned and sanitized 47.Food and nonfood-contact surfaces cleanable, properly IN OUT 17. Proper disposition of returned, previously served, designed, constructed, and used IN OUT reconditioned, and unsafe food 48. Warewashing facilities: installed, maintained, and used; test <u>IN</u> OUT Potentially Hazardous Food (Time/Temperature Control for Safety strips OUT 49 Nonfood-contact surfaces clean Food) <u>IN</u> OUT N/A N/O 18. Proper cooking time and temperatures Physical Facilities OUT N/A N/O 19. Proper reheating procedures for hot holding OUT 50. Hot and cold water available; adequate pressure OUT N/A N/O 20. Proper cooling time and temperature IN OUT 51.Plumbing installed; proper backflow devices IN OUT N/A N/O 21. Proper hot holding temperatures ĪŊ OUT 52. Sewage and waste water properly disposed OUT N/A 22. Proper cold holding temperatures ĺΝ OUT 53. Toilet facilities: properly constructed, supplied, and cleaned OUT N/A N/O 23. Proper date marking and disposition <u>IN</u> OUT 54. Garbage and refuse properly disposed, facilities maintained OUT N/A N/O 24. Time as a public health control: procedures and records ĪN OUT 55.Physical facilities installed, maintained, and clean Consumer Advisory 56.Adequate ventilation and lighting; designated areas used OUT N/A 25.Consumer advisory provided for raw or undercooked foods OUT = not in N/O = notHighly Susceptible Populations IN = in compliance compliance observed OUT N/A 26. Pasteurized foods used; prohibited foods not offered COS = corrected on-R = repeat OUT N/A 27.Food additives: approved and properly used N/A = not applicableOUT N/A 28. Toxic substances properly identified, stored, and used violation Conformance with Approved Procedures 29. Compliance with variance, specialized process, and HACCP IN OUT N/A

Establishment Name EUREST DINING SERVICES Establishment Address 1800 F ST NW

OBSERVATIONS	25 DCMR	CORRECTIVE AC	TIONS		
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Temperatures		Dir.		<u> </u>	
Item/Location Temp Item/Loca	ation Temp Itei	m/Location	Temp	Item/Location	Tem
Hot Water					
(Handwashing 108.6F Sink - kitchen)					
Sink - kitchen)					
Inspector Comments:					
Demonstration of knowledge ques	tions: Rachelle Thompso	on (ServSafe Certi	ficate Nu	mber 1454894: Es	cam Date
1/3/2017)		(tain Date
3 Day Notices Abated From Inspe	ation Conducted On 1 O	2017.			
25 DCMR 504.1	ction Conducted On 1/9/	2017:			
25 DCMR 2306.1					
	12 m				
3 Day Notices Pending From Inspe	ection Conducted On 1/9	/2017:			
25 DCMR 1600.1					
25 DCMR 2607.2					
14 Day Notices Pending From Insp	pection Conducted On 1/	/9/2017:			
25 DCMR 3004.1		70.2s			
25 DCMR 1701.1					
25 DCMR 2908.1					
25 DCMR 3008.1(b)					
Please submit all questions/inquiri-	es to the Area Superviso	r at food safety@d	c gov fo	r an efficient resno	nse
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	Rach	elle Thompson		01/25/2017	
Person-in-Charge (Signature)	(Prin			Date	
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	Ivory Gene Coo	nar	650	01/25/2017	
Inspector (Signature)	(Print)	per	050	01/25/2017	